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8444	•

## **In-Kind Contributions Received**

Provided by Novicen of Some Vist.

0			<del></del>				
Name of Committee in Full Citizens for Priscilla Tyson							
Full Name of Contributor	Employer Ox			Rejustration Number, if PAC			
Franklin County Democratic Party	employer. Coc	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Street Address	Description of	Item or Service	M D	TY	Fair Marker Value	··········	
PO Box 77669	Description of	Description of Item or Service Roboralls				4934	
City	State	Zip Code	Received at Fu	<del></del>			
Columbus	) 11	43207	YES	ran an annag	X NO		
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Friends of Shannon Hardin	Language, Color	opanion, i moot or gunianten	registration (without, it ) is:				
Street Address	Description of	Item or Service	M D	Ϋ́	Fair Market Value		
545 East Town Street	,		1 1	1 7	-   5	2,500.00	
Cirv	State	Zip Code	Received at Fundraising Event'				
Columbus	() H	43215	YES		X NO		
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC				
			<u> </u>				
Street Address	Description of	Item or Service	M D	Y	Fair Market Value		
City	State	Zip Code	Received at Fur	draising	Event?		
			YES NO				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Street Address	Description of	Description of Item or Service		Ý	Fair Market Value		
City	State	State Zip Code		Received at Fundraising Event?			
Full Name of Contributor	Employer. Occ	Employer, Occupation, Labor Organization *		YES NO Registration Number, if PAC			
			M D				
Street Address	Description of	Description of Item or Service		Y	Fair Market Value		
City	State	Zip Code	Received at Fur	drausing			
			YES NO				
Full Name of Contributor	Employer, Occi	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Street Address	Description of	tem or Service	M D	Y	Fair Market Value		
City	State	Zıp Code	Received at Fur	draising		***************************************	
			YES NO				
Full Name of Contributor	Employer, Occi	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Stroet Address	Description of I	Description of Item or Service		Y	Fair Market Value	······································	
City	State	Zip Code	Received at Fur	draising !	Event? NO	***************************************	
		<u> </u>	1 163		380		

Page Total	\$	2,349,34
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<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any rather than employer should be insted. If two or more employees contribute is a payroll deduction and exceed the aggregate of \$100 the labor organization of which the employees are members, if any, must appear (R.C. 3517-10(B)x4).